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ONE HUNDRED EIGHTH CONGRESS

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VETERANS HEALTH PROGRAMS IMPROVEMENT ACT OF 2004**H.R. 3936, AS AMENDED**

TITLE: A bill to amend title 38, United States Code, to increase the authorization of appropriations for grants to benefit homeless veterans, to improve programs for management and administration of veterans' facilities and health care programs, and for other purposes.

H.R. 3936, as amended, would:

TITLE I—ASSISTANCE TO HOMELESS VETERANS

1. Increase the authorization for the grant and per diem program for homeless veterans from \$75 million to \$99 million for fiscal year 2005.

TITLE II—VETERANS LONG-TERM CARE PROGRAMS

1. Direct the Secretary to make payments to States to assist them in hiring and retaining nurses in State veterans' homes; makes State homes eligible for such payments if it has an employee incentive program and is receiving per diem payments from VA; limit the amount of payment a State home may receive each year; require a State home receiving such payment to provide an annual report to VA; and require VA to implement the assistance program so that eligible States would begin to receive payments no later than June 1, 2005.
2. Clarify that per diem payments made by VA for the care of veterans in State veterans homes shall not be used to offset or reduce other payments made to assist veterans.
3. Extend until December 31, 2005, VA's authority to provide care to veterans participating in certain long-term care demonstration projects previously authorized in the Veterans Millennium Health Care and Benefits Act.
4. Eliminate copayments for hospice care furnished by VA.

TITLE III—MEDICAL CARE

1. Make permanent the authority of the Secretary to provide sexual trauma counseling to veterans.
2. Establish centers for research, education and clinical activities that specialize in treating complex multi-trauma associated with combat injuries.
3. Reduce the amount authorized to establish four National Medical Emergency Preparedness Centers from \$20 million to \$10 million per year.

TITLE IV—MEDICAL FACILITIES MANAGEMENT AND ADMINISTRATION**Subtitle A—Major Medical Facility Leases**

1. Authorize leases (all requested by the Department of Veterans Affairs (VA)) to be paid from the medical care account for outpatient clinics or other health care facilities which VA currently operates or plans to operate in: Wilmington, North Carolina, in the amount of \$1,320,000; Greenville, North Carolina, in the amount of \$1,220,000; Norfolk, Virginia, in the amount of \$1,250,000; Summerfield, Florida, in the amount of \$1,230,000; Knoxville, Tennessee, in the amount of

\$850,000; Toledo, Ohio, in the amount of \$1,200,000; Crown Point, Indiana, in the amount of \$850,000; Fort Worth, Texas, in the amount of \$3,900,000; Plano, Texas, in the amount of \$3,300,000; San Antonio, Texas, in the amount of \$1,400,000; Corpus Christi, Texas, in the amount of \$1,200,000; Harlingen, Texas, in the amount of \$650,000; Denver, Colorado, in the amount of \$1,950,000; Oakland, California, in the amount of \$1,700,000; San Diego, California (two sites), in the amounts of \$1,300,000 and \$1,100,000, respectively.

2. Authorize appropriations of \$24,420,000 for the leases in the preceding paragraph.
3. Authorize VA to enter into a long-term lease of up to 75 years for land to construct a new medical facility on the Fitzsimons Campus of the University of Colorado, in Aurora, Colorado.

Subtitle B – Facilities Management

4. Provide the Secretary with additional authority to transfer unneeded VA real property and retain the proceeds from the transfer.
5. Require VA to receive fair market value for any transfer of real property, except when transferred to providers of homeless veterans' services receiving grants under section 2011 of title 38, United States Code.
6. Establish a new "Capital Asset Fund" for deposit of proceeds from transfers of real property to be used to defray VA's cost of such transfers, including demolition, environmental remediation, maintenance, repair, establishment of new and improved facilities, historic preservation and administrative expenses.
7. Authorize an appropriation of \$10,000,000 for the Capital Asset Fund.
8. Terminate the Nursing Home Revolving Fund and transfer unobligated balances from the fund to the Capital Asset Fund subsequent to the Secretary's certification that VA facilities maintain long-term care capacity as required by law.
9. Require an inventory and two subsequent annual reports to Congress on the status of, and plans for, VA properties listed on the National Register of Historic Properties.
10. Authorize VA to acquire and transfer certain real property in the District of Columbia for use for homeless veterans.
11. Require VA to notify Congress of the impact of actions proposed for health facilities specified in this Act that may result in a facility closure, consolidation, or administrative reorganization, and prohibit such actions from occurring until 60 days following the notification or 30 days of continuous session of Congress as specified.
12. Authorize the use of project funds to construct or relocate surface parking incidental to an authorized major medical facility construction project.
13. Provide the Secretary flexibility in using funds to develop advance planning for major construction projects previously authorized by law.
14. Exempt VA from state and local land use laws under the enhanced-use lease authority.
15. Allow the Commonwealth of Kentucky the first option on the further use of the VA Medical Center in Louisville, Kentucky for a State veterans' home upon any proposed VA disposal of the medical center.
16. Transfer to VA certain property in Boise, Idaho, currently administered by the General Services Administration, for the provision of veterans' benefits.

Subtitle C – Designation of Facilities

17. Authorize VA to name the VA Medical Center in Amarillo, Texas, the Thomas E. Creek Department of Veterans Affairs Medical Center.
18. Authorize VA to name the VA Medical Center in the Bronx, New York, the James J. Peters Department of Veterans Affairs Medical Center.
19. Authorize VA to name the outpatient clinic in Peoria, Illinois, the Bob Michel Department of Veterans Affairs Outpatient Clinic.

20. Authorize VA to name the outpatient clinic in Lufkin, Texas, the Charles Wilson Department of Veterans Affairs Outpatient Clinic.
21. Authorize VA to name the outpatient clinic in Sunnyside, Queens, New York, the Thomas P. Noonan, Jr. Department of Veterans Affairs Outpatient Clinic.

TITLE V—PERSONNEL ADMINISTRATION

1. Establish a pilot program within the Department of Veterans Affairs (VA) to study the use of outside recruitment, advertising and communications agencies and interactive and online technologies, to improve VA's program for recruiting nursing personnel.
2. Add blind rehabilitation personnel to the category of positions VA is permitted to hire through use of a hybrid appointment authority.
3. Repeal the requirement for VA's Under Secretary for Health to be a medical doctor.

TITLE VI—OTHER MATTERS

1. Extend and codify VA's authority to recover overpayments made for fee and contract health care services for veterans.
2. Require VA to establish an inventory of medical waste management activities at VA health care facilities and submit a report to Congress by June 30, 2005, concerning such activities.
3. Clarify that veterans enrolled in VA health care are eligible to use the Veterans' Canteen Service (VCS).
4. Require VA to submit annual reports through 2007 to Congress on veterans' waiting times for VA specialty care appointments.

EFFECTIVE DATE: Date of enactment

LEGISLATIVE HISTORY:

May 19, 2004: H.R. 3936 ordered reported favorably by the Committee on Veterans' Affairs.
 June 25, 2004: H.R. 3936 reported by the Committee on Veterans' Affairs. H. Rept. 108-574, Part I.
 June 25, 2004: Committee on Armed Services discharged.
 July 20, 2004: Passed the House under suspension by voice vote.
 July 21, 2004: Received in the Senate.
 Sep. 7, 2004: Referred to the Senate Committee on Veterans' Affairs
 Oct. 9, 2004: Senate Committee on Veterans Affairs discharged by unanimous consent.
 Oct. 9, 2004: Senate struck all after the enacting clause and substituted the language of S. 2485, as amended.
 Oct. 9, 2004: Passed the Senate in lieu of S. 2485 with an amendment and an amendment to the Title by unanimous consent.